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REPORT  
OF THE  
MEDICAL OFFICER OF HEALTH  
FOR THE YEAR  
1948

A. D. SYMONS, M.D., D.P.H.

SHREWSBURY  
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# Borough of Shrewsbury



# REPORT

OF THE

## MEDICAL OFFICER OF HEALTH

FOR THE YEAR

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## STAFF OF THE PUBLIC HEALTH DEPARTMENT

### Medical Officer of Health

### Medical Superintendent of Isolation Hospital

Medical Officer for Maternity and Child Welfare till July 5th.

†A. D. SYMONS, M.D., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

### Senior Sanitary Inspector

†\*C. STANLEY, Cert. R.S.I.

### Additional Sanitary Inspectors

†\*I. G. GRIFFITHS, Cert. R.S.I.

†\*D. H. LIVESEY, Cert. R.S.I.

### Health Visitors

†MRS. E. GODSON, B.A., C.M.B.	} till July 5th.
†MISS E. L. CHALLONER, C.M.B.	
†MRS. I. L. M. WRIGHT, C.M.B.	

### Matron of Isolation Hospital

MISS D. M. HOWELLS, S.R.N.

### Chief Clerk

G. NICHOLAS.

### Assistant Clerks

†MISS F. C. PUDDLE, till July 5th.  
C. MABBOTT.

### Abattoir Superintendent and Meat Inspector

\*S. R. REED, Cert. R.S.I.

### Assistant Meat Inspector

\*N. EDGE, Cert. R.S.I.

## PART-TIME OFFICERS

**Medical Officer of Ante-Natal Clinic, Obstetric Consultant, and Consultant for Puerperal Pyrexia, etc.**

D. A. URQUHART, M.B., Ch.B., till July 5th.

**Assistant Medical Officer, Maternity and Child Welfare**

KATHLEEN M. BALL, M.B., B.Ch., D.P.H., till July 5th.

**Social Worker (Care of Illegitimate Children)**

MISS D. M. UNGATE, till July 5th.

**Meteorological Observer**

R. GRAY.

**Sampling Officer**

W. C. HEAS.

**Public Analyst**

HAROLD LOWE, M.Sc., F.I.C.

\*Qualified Meat Inspectors.

†Contribution towards salary made under Public Health Acts or by Exchequer grants.



HEALTH CENTRE,  
MURIVANCE,  
SHREWSBURY.  
May, 1949.

*To the Mayor, Aldermen and Councillors of the  
Borough of Shrewsbury*

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report on the health of the Borough during the year 1948.

The birth rate which was 18.1 in 1947 fell to 17.2 in 1948, with 777 live births.

There were 25 deaths among the 777 live births, giving an Infant Mortality Rate of 32, compared with rates of 33 and 48 in the previous years respectively.

The death rate for all ages was 9.8 compared with 10.9 and 12.3 in the two previous years. There were 444 deaths.

The number of illegitimate births which had been 46 in 1947 rose to 60 in 1948.

As regards infectious diseases, diphtheria did not give rise to a single case, and whereas 303 cases of measles and 113 of whooping cough were notified, there were no deaths from the former disease and only one death from the latter.

On July 5th, 1948, on the coming into force of the National Health Service Act, 1946, certain powers and duties previously carried out by the Borough Council were transferred to the Local Health Authority, which is the Salop County Council.

Of these transferred functions, Maternity and Child Welfare had been administered by the Council since the passing of the Act in 1918; Diphtheria Immunization commenced in 1936 in Shrewsbury was a pioneer effort among the Local Authorities in the County, as was also the new Home Helps Scheme which was started in 1947, superseding that which had been in force since 1919.

It is not for us, but for others, to decide whether these services for which the Council was responsible in the past, were sufficiently efficient to satisfy the public and to help to give favourable results.

This Report for the year 1948 is in some respects, therefore, only half a Report, in that at the middle of the year the aforementioned services passed out of your control.

The trend of modern legislation to centralize powers or functions either in Government Departments, ad hoc Boards or the larger Local Authorities, is deplored by many whilst, of course, approved by others with opposite views.

Some people imbued with local pride and patriotism are beginning to wonder whether it is worth while to take much interest in Local Authority affairs if all it means is to be a rubber stamp for

Whitehall edicts or decisions or to merely act as agents for larger Local Authorities, who may or may not delegate certain powers, while retaining an overall control in matters of finance and general policy.

One thing is fairly certain and that is, with remoteness of control which is inevitable when affairs are centralized, there is not and cannot be that intimate personal touch between the people and those who conduct affairs for their government and welfare.

Facts have to be faced, whether palatable or otherwise, but if a change of procedure is desired and is justified, can our present democracy with its voting powers demand a change or have the public been lulled into apathetic acceptance of the evolution, if it cannot be called revolution, which has already taken place?

This Report deals with health matters, and it is apparent that a Local Authority such as yours is now concerned only with Environmental Hygiene in all its aspects, the Personal Health Services having been handed over to others.

It might be thought by some that to-day, after 100 years of Public Health legislation and Local Authority activities resulting in modern house building, water supplies, sewerage systems, refuse disposal and so on, all is well and there is not much more to do.

This is not the case, however; constant vigilance is required as recent outbreaks of typhoid fever, food poisoning and smallpox remind us, and so far very little has been done to grapple with the problems of smoke abatement in our towns and cities, and we have yet to complete our programme of slum clearance which was progressing so well until the second World War shut down these particular activities.

As regards the Health activities of minor Local Authorities can discouragement be overcome if we can be brought to realize that we still have our usefulness and directly or indirectly are protecting or fostering health among our public for whom we are responsible?

A member of the Town Council who does not happen to sit on the Public Health Committee may think that he or she can leave it to that Committee to safeguard the inhabitants, and that the work they do on other Committees of the Council has little connection with health.

It might be as well to consider how in some way or other more than half of the standing Committees of the Council are directly or indirectly in partnership with the Public Health Committee in the sphere of Environmental Hygiene and are, therefore, working for healthy conditions and opportunities for the people.

### **Housing Acts Committee**

This Committee is intimately associated with the aims of the Public Health Committee by providing modern healthy houses for those most in need. The modern standard of a satisfactory house for everyone is set out in the Housing section of this Report. This will

enable members of the Council to compare modern standards with the thousands of existing houses in the town which are sub-standard in one or more respects.

Suffice it to say that the houses erected by the Housing Committee are so designed and spaced with amenities indoors for sanitation and a garden for fresh air and sunlight, as well as the growing of vegetables or flowers, that all opportunities for healthy living conditions are made available.

### **Water Committee**

The work of this Committee is directly concerned with Health, in that for 45,000 people water has to be provided in adequate quantity for ablution and domestic purposes, as well as pure in quality for potable purposes.

If one remembers the past when the townspeople consumed the polluted river water supplied and died of typhoid, and realises that to-day with a plentiful supply of pure water, daily tests and constant vigilance are necessary, one can see how much this Committee contributes towards the health of the inhabitants.

### **Baths Committee**

Swimming can be the healthiest of all physical exercises, for more muscles are exercised in swimming than in any other form of sport or recreation.

Every endeavour is made to ensure the best conditions by filtration and chlorination of the water. Some day even healthier conditions may be provided when an open-air bath can be afforded.

The slipper baths help to promote health for those whose houses (and they are many) which do not possess a bath.

Even the Zoto foam baths may help the health of some, mainly males, who try to get rid of their accumulation of waste products by sweating ; whereas the ladies who mostly patronize them for reducing purposes may feel happier when their figures become more to their liking and if happier then healthier !

### **Estates Committee**

A good deal of the work of this Committee is concerned with healthy outdoor activities, in that it provides and maintains Public Parks, Recreation Grounds, Pleasure Grounds and Allotments. It caters for all ages ; for the very young in playgrounds ; for youth in tennis courts and football playing spaces ; for the middle aged in bowling greens and allotments, and for the elderly in the restful contemplation of flowers, shrubs, trees and grass.

### **Highways and Planning Committee**

One of the most important functions of this Committee is to control the general planning of the town, as it develops or alters, so as to provide open spaces and adequate width of streets in order to let in air and light so to speak.

The plans for all new houses erected or altered have to pass scrutiny to ensure healthy living conditions.

The cleansing of streets, removal of manure and refuse and its subsequent disposal in a proper manner, are all actions performed in the interests of the promotion of health or the prevention of disease.

It is interesting to note that more or less as a sideline or by-product, playing fields and agricultural land have been created on the sites of former refuse tips.

### **Cemetery Committee**

It might seem strange to include this Committee as having health objectives, for death is more often than not the failure of health.

If, however, the dead were not disposed of decently and in a sanitary manner, the health of the community would be adversely affected.

The work of this Committee will be eased and will be more satisfactory still when cremation is universally recognized as a cleaner and a safer method and one which does not encroach much on the acres of England, which are fast being absorbed for other than agricultural purposes.

Of the other half dozen of the standing Committees of the Council, though some sort of case might be made out for some indirect connection with Health matters, it is at any rate appropriate to mention the Rating and Valuation Committee and the Finance, General Purposes and Parliamentary Committee. It is said that "money talks," and as none of the Committees could carry out their work without expenditure of money, the importance of the former Committee which raises and collects money and of the latter Committee which sanctions, approves and distributes this money, cannot be left out of account.

The foregoing remarks have been made to demonstrate how the Council almost as a whole is, often perhaps without realization, expending time and energy on many matters which are fundamentally Health matters and therefore, though robbed of many former interests, are still playing a part in what is left to us. The powers that be may consider that what is left is what is right as far as we are concerned. If Right is Left and Left is Right (politics excepted) then surely nothing can be Wrong ! Or can it be ?

I offer my best thanks to those of my staff who worked with me until they were transferred elsewhere and, of course, to those who remain with me to keep the ship afloat with reduced sails.

I have the honour to be,

Your obedient servant,

A. D. SYMONS.

## GENERAL STATISTICS, 1948

---

Rateable value of the Borough ... ..	£315,435
Sum represented by a Penny Rate ... ..	£1,263
Area of the Borough (excluding water) in acres ...	8,034
Population (Registrar General's estimate, middle of 1948)	45,090
Persons per acre calculated on above population ...	5.6
Inhabited houses (December 31st, 1948) ... ..	12,021

	MALE	FEMALE		
Live Births	<div style="display: flex; align-items: center; justify-content: center;"> <div style="display: flex; flex-direction: column; align-items: center; margin-right: 10px;"> <div>Legitimate</div> <div>Illegitimate</div> </div> <div style="display: flex; flex-direction: column; align-items: center;"> <div>385</div> <div>30</div> </div> <div style="display: flex; flex-direction: column; align-items: center; margin-left: 10px;"> <div>332</div> <div>30</div> </div> </div>		Total ...	777
BIRTH RATE per 1,000 estimated resident population				17.2
Stillbirths ... ..				19
Stillbirth Rate per 1,000 Total Births ... ..				25.1
Deaths ... ..				444
DEATH RATE per 1,000 population ... ..				9.8
Deaths from Puerperal Sepsis ... ..				Nil
„ „ Other Puerperal causes ... ..				1
MATERNAL MORTALITY per 1,000 Total Births (live and still) ... ..				1.2
INFANT MORTALITY RATE ... ..				32
Legitimate Infant Mortality Rate per 1,000 legitimate live births ... ..				32
Illegitimate Infant Mortality Rate per 1,000 illegitimate live births ... ..				33
Deaths from Cancer (all ages) ... ..				89
„ „ Measles (all ages) ... ..				Nil
„ „ Whooping Cough (all ages) ... ..				1
„ „ Diarrhoea (under 2 years of age) ... ..				1

## WEATHER CONDITIONS

Daily readings and weather recording are taken at Monkmoor Isolation Hospital, where there is a Climatological Station approved by the Air Ministry.

The Station was inspected by the Air Ministry in July and a very satisfactory report was given by the Inspector, who also noted that "The keenness and interest taken by the observer (Mr. R. Gray) in maintaining a high standard of efficiency was greatly appreciated."

The outstanding features of the year 1948 were the notably sunny spring and the generally dull summer.

August was excessively dull, being the dullest on record in the Midlands.

**Rainfall.**—The total rainfall was 26.66 inches, compared with 22.15, 29.04 and 23.93 in the previous years respectively.

**Sunshine.**—The number of hours of bright sunshine recorded was 1455.6, compared with 1380.6, 1324.7 and 1326.8 in the previous years respectively.

May, with 251.7 hours of sunshine was the sunniest month.

**Temperatures.**—Extremes of temperature during the year were as follows :—

WARMEST DAY (Highest Shade Maximum)	July 29th	89°
WARMEST NIGHT (Highest Shade Minimum)	July 29th	66°
COLDEST DAY (Lowest Shade Maximum)	February 20th	30°
COLDEST NIGHT (Lowest Shade Minimum)	December 19th	23°

The hottest day in the sun was July 26th, with 124°.

# Weather Statistics. Shrewsbury, 1948.

1948 Month	Barometric Pressure in Inches	AIR TEMPERATURE IN SHADE °F				Hottest Day in Sun	SUNSHINE IN HOURS				RAINFALL IN INCHES		
		Mean Maximum	Highest Maximum and Date	Mean Minimum	Lowest Minimum and Date		Mean Temperatures	Most Sunshine in one Day	Daily Means	Total Hours	No. of Rainy Days	Greatest fall in one Day	Total Rainfall
Jan. ...	29.434	47.2	57° on 3rd	37.1	30° on 17th 19th & 20th	42.1	82° on 30th	6.4 on 18th	1.72	53.4	28	0.54 on 7th	4.53
Feb. ...	30.142	45.8	56° on 29th	36.0	24° on 21st	40.9	87° on 13th	8.1 on 26th	2.51	72.8	14	0.24 on 2nd	1.39
Mar. ...	30.325	56.5	70° on 9th	38.1	28° on 6th	47.3	100° on 9th	10.8 on 28th	5.16	160.0	7	0.35 on 31st	1.00
April ...	29.888	57.5	69° on 27th	39.4	31° on 10th	48.4	110° on 27th	12.7 on 26th	5.79	173.8	16	0.49 on 17th	1.95
May ...	30.003	63.2	77° on 18th	41.2	32° on 25th & 28th	52.2	115° on 7th	14.6 on 18th	8.12	251.7	13	0.30 on 29th	1.37
June ...	29.937	64.8	78° on 13th	49.0	38° on 9th	56.9	118° on 26th	11.7 on 12th	5.24	157.1	21	0.41 on 1st	2.60
July ...	29.998	68.3	89° on 29th	52.9	39° on 17th	60.6	124° on 26th	13.2 on 29th	5.10	158.1	14	0.42 on 17th	1.35
Aug. ...	29.878	66.9	75° on 7th,	52.6	43° on 21st	59.7	117° on 7th, 23rd & 29th	9.3 on 22nd	3.67	113.9	15	1.18 on 11th	3.09
Sept. ...	29.980	64.1	69° on 7th, 9th, 10th, 27th & 30th	51.6	34° on 22nd	57.8	113° on 25th	10.1 on 21st	3.84	115.1	12	0.83 on 12th	2.30
Oct. ...	30.019	56.6	66° on 10th	43.5	26° on 27th	50.0	105° on 10th	8.4 on 26th	2.41	74.7	14	0.38 on 17th	1.81
Nov. ...	30.149	51.1	64° on 2nd	40.5	24° on 9th	45.8	96° on 3rd	7.7 on 5th	2.13	63.8	15	0.33 on 12th	1.71
Dec. ...	29.994	46.9	59° on 3rd	36.0	23° on 19th	41.4	83° on 3rd	6.2 on 8th	1.97	61.2	16	1.41 on 30th	3.56
										1455.6			26.66

# VITAL STATISTICS

## 1948 AND PREVIOUS YEARS

Year	Population (estimated) each year by Registrar General	Births		Under 1 Year of Age		Deaths		
		Number	Rate per 1,000 Live Births	Number	Infant Mortality Rate per 1,000 Births	At all Ages		Rate Adjusted
						Number	Crude	
1938 ...	38480	587	15.2	22	37	494	12.8	12.1
1939 ...	40260	582	14.7	33	57	515	12.8	12.2
1940 ...	42070	706	16.4	31	44	590	14.0	14.1
1941 ...	45220	753	16.6	29	37	549	11.9	—
1942 ...	44860	839	18.7	32	38	419	9.3	—
1943 ...	42890	744	17.3	26	35	509	11.9	—
1944 ...	42800	866	20.2	21	24	441	10.3	—
1945 ...	42820	769	17.9	37	48	481	11.2	—
1946 ...	44070	792	17.9	38	48	542	12.3	—
1947 ...	44110	797	18.1	26	33	483	10.9	—
1948 ...	45090	777	17.2	25	32	444	9.8	—

## POPULATION

The Registrar General's estimate of the civil population of Shrewsbury for 1948 was 45,090, compared with 44,110 in the previous year.

## BIRTHS

The number of live births in 1948 was 777, compared with 797 and 792 in the previous years respectively.

The birth rate for 1948 was 17.2, compared with 18.1, 17.9 and 17.9 in the previous years respectively.

The 777 live births may be analysed as follows :—

				Legitimate	Illegitimate	
Male ...	...	...	385	30		} 777
Female ...	...	...	332	30		

gitimate births, compared with 46, 75 and 101 s respectively.

birth rate was 1.3 per 1,000 population, illegiti- a percentage of 7.7 of the total live births.

illbirths, compared with 19, 20 and 15 in the ctively.

per 1,000 population was 0.42, the stillbirths 2.5 of the total births.

tween the birth rates and stillbirth rates as and the average of other areas is set out in the

				Rates per 1,000 Population	
				Live Birth	Stillbirth
Wales	...	...	...	17.9	0.42
London	...	...	...	20.1	0.39
126 County Boroughs and Great Towns	...	...	...	20.0	0.52
148 Smaller Towns	...	...	...	19.2	0.43
SHREWSBURY	...	...	...	17.2	0.42

WARRINGTON, COUNTY BOROUGH

Medical Officer

Annual Reports for 1933-3

## DEATHS

The number of deaths during the year was 444, compared with 483, 542 and 481 in the previous years respectively.

Of the 444 deaths, 226 were males and 218 were females.

The crude death rate was 9.8 per 1,000 population, compared with 10.9, 12.3 and 11.2 in the previous years respectively.

The death rate for 1948 was the lowest but one ever recorded in Shrewsbury, the lowest death rate being 9.3 in 1942.

Of the 444 deaths, 278 persons were 65 years of age or over.

If the main causes of death are grouped it will be seen that 350 of the 444 deaths can be allocated to 4 groups as follows :—

1. Heart disease	...	...	...	...	158 deaths
2. Other diseases of circulatory system, including intra cranial vascular lesions	...	...	...	...	60 „
3. Cancer (all sites)	...	...	...	...	89 „
4. Bronchitis, pneumonia and other respiratory diseases, including pulmonary tuberculosis	...	...	...	...	43 „

Excluding tuberculosis from which there were 6 deaths, influenza from which there were 3 deaths, and whooping cough from which there was 1 death, there were no deaths from all the other infectious diseases.

Taking the child population from infancy to school-leaving age, there were 25 infant deaths up to one year of age, 5 deaths of children of pre-school age (1—5 years), of which 4 were due to violent causes, and 3 deaths among children of school age, one of which was due to a road accident.

## Causes of and Ages at Death during the Year 1948

CAUSES OF DEATH	NET DEATHS AT THE SUBJOINED AGES OF " RESIDENTS " WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT														
	Male	Female	Under 1	1	2	3	4	5	10	15	20	35	45	65 and over	
	226	218	25	—	—	1	—	4	1	2	14	15	104	278	
Typhoid and paratyphoid fevers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Cerebro-spinal fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Scarlet fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Whooping cough ...	—	1	1	—	—	—	—	—	—	—	—	—	—	—	
Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Tuberculosis of respiratory system ...	6	—	—	—	—	—	—	—	—	1	2	—	3	—	
Other forms of tuberculosis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Syphilitic diseases ...	—	1	—	—	—	—	—	—	—	—	—	—	1	—	
Influenza ...	2	1	—	—	—	—	—	—	—	—	—	1	—	2	
Measles ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Acute poliomyelitis & polio-encephalitis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Acute inf. encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Cancer of buc. cav. and oesoph. (M.),uterus(F)	3	5	—	—	—	—	—	—	—	—	—	—	3	5	
Cancer of stomach and duodenum ...	12	3	—	—	—	—	—	—	—	—	—	1	4	10	
Cancer of breast ...	—	11	—	—	—	—	—	—	—	—	—	1	2	8	
Cancer of all other sites	32	22	—	—	—	—	—	—	—	—	3	—	24	28	
Diabetes ...	2	4	—	—	—	—	—	—	—	—	—	—	1	5	
Intra-cranial vascular lesions ...	11	34	—	—	—	—	—	—	—	—	1	1	9	34	
Heart disease...	89	69	—	—	—	—	—	—	—	—	2	5	29	122	
Other diseases of circulatory system ...	5	10	—	—	—	—	—	—	—	—	—	—	6	9	
Bronchitis ...	14	8	2	—	—	—	—	1	—	—	—	—	7	12	
Pneumonia ...	7	5	2	—	—	—	—	—	—	—	—	1	3	6	
Other respiratory diseases ...	2	1	—	—	—	—	—	—	—	—	—	—	2	1	
Ulcer of stomach or duodenum ...	3	2	—	—	—	—	—	—	—	—	1	—	1	3	
Diarrhoea under 2 years	1	—	1	—	—	—	—	—	—	—	—	—	—	—	
Appendicitis ...	—	2	—	—	—	—	—	—	—	—	—	—	1	1	
Other digestive diseases	4	2	—	—	—	—	—	—	—	—	—	—	2	4	
Nephritis ...	1	1	—	—	—	—	—	—	—	—	—	—	1	1	
Puerperal and post-abort. sepsis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Other maternal causes	—	1	—	—	—	—	—	—	—	—	1	—	—	—	
Premature birth ...	5	2	7	—	—	—	—	—	—	—	—	—	—	—	
Congenital malformation, birth injury, infant: dis. ...	8	3	11	—	—	—	—	—	—	—	—	—	—	—	
Suicide ...	1	3	—	—	—	—	—	—	—	—	—	2	—	2	
Road traffic accidents	1	3	—	—	—	—	—	—	1	—	—	—	1	2	
Other violent causes...	2	9	—	—	—	1	—	3	—	—	2	1	1	3	
All other causes ...	14	15	1	—	—	—	—	—	—	1	2	2	3	20	

### INFANT MORTALITY

The number of deaths of infants under one year of age was 25, compared with 26, 38 and 37 in the previous years respectively.

The Infant Mortality Rate was 32 per 1,000 live births, compared with 33, 48 and 48 in the previous years respectively.

The causes of infant deaths are set out in the table below.

#### Infant Mortality, 1948

Net deaths from stated causes at various ages under 1 year of age.

CAUSES OF DEATH				Under 1 week	1—2 weeks	2—3 weeks	3—4 weeks	Total under 1 month	1 month and under 3 months	3 months and under 6 months	6 months and under 9 months	9 months and under 12 months	Total deaths under 1 year
	No.												
Congenital Causes	18	Prematurity ...	...	6	—	2	—	8	—	—	—	—	8
		Atelectasis ...	...	—	—	—	1	1	2	—	—	—	3
		Pyloric Stenosis ...	...	—	—	—	—	—	1	—	—	—	1
		Debility ...	...	—	2	—	—	2	—	—	—	—	2
		Birth Injury ...	...	4	—	—	—	4	—	—	—	—	4
Respiratory	4	Pneumonia ...	...	—	—	—	—	—	—	1	1	—	2
		Bronchitis ...	...	—	—	—	—	—	2	—	—	—	2
Infectious	1	Whooping Cough	...	—	—	—	—	—	1	—	—	—	1
Gastro-Intestinal	1	Gastro Enteritis	...	—	—	—	—	—	1	—	—	—	1
Miscellaneous	1	Encephalitis ...	...	—	—	—	—	—	—	—	1	—	1
Totals	... 25			10	2	2	1	15	7	1	2	—	25

## SANITARY CIRCUMSTANCES OF THE AREA

### Water Supply

Mr. A. B. Baldwin (Water Engineer) has kindly provided the following notes on the water supply of the town, together with statistics of laboratory examinations at Shelton Waterworks :—

“ **River Severn Supply.**—During the year under review Shelton Works have supplied the whole of the Borough’s water requirements free of all restriction. The average daily quantity supplied amounted to 1,865,201 gallons, which is equivalent to 41.1 gallons per head per day. The per capita consumption is again less than the previous year due to continued waste detection and reduction in consumption for trade purposes.

Routine daily chemical and bacteriological examinations are carried out at Shelton on the water at separate stages in treatment. A summary of the results of these examinations is given in the accompanying table. It will be noted that the bacteriological condition of the raw water was much better than previous years, but contained larger amounts of colloidal peat giving a high colour. It is considered that both these effects are due to weather conditions. The water supplied to the town has continued to reach the very high standard of purity demanded for public water supplies in this country.”

# SHELTON WATER SUPPLY

## Average results of Chemical and Bacteriological Examinations, 1948

BACTERIOLOGICAL		CHEMISTRY Results expressed as parts per 100,000			
ITEM		RIVER WATER UNTREATED	WATER AFTER STORAGE AND PRECHLORINATION	WATER AFTER FILTRATION	WATER AFTER STERILIZATION
Probable No. of coliform bacteria present per 100 ml. ... ..		1,280 + (Min. 10)	Nil	Nil	Nil
Colony count per ml. at 37° C. ... ..		112 (Min. 1)	18.32	2.93	1.93 (Min. Nil. Max. 20)
Colony count per ml. at 20° C. ... ..		1,698 (Min. 48)	42.63	10.21	7.2 (Min. Nil. Max. 130)
			WATER AFTER STORAGE AND PRECIPITATION	WATER AFTER FURTHER PRECIPITATION (WHEN NECESSARY)	WATER AFTER STERILIZATION AND FILTRATION
Colour (Hazen scale) ... ..		36.24	18.32	4.43	1.58
pH. ... ..		7.2	6.9	6.8	6.93
Alkalinity (CaCo <sub>3</sub> ) ... ..		5.3	4.47	4.38	4.72
Chlorides ... ..		2.1	2.1	2.1	2.1
Free Ammonia ... ..		0.0073	—	—	0.0102
Oxygen absorbed ... ..		0.259	—	—	0.091
Total Hardness ... ..		—	—	—	9.1
Permanent Hardness ... ..		—	—	—	2.1
Residual Chlorine ppm. ... ..		—	—	—	0.106

The water supply position of dwelling houses in the town as completed during the year 1948 may be summarized as follows :—

Total number of houses	...	...	...	12,021
Total number of houses with a piped supply				11,927
Houses with piped Corporation water supply				11,873
Houses with a piped supply from other sources				54
Houses without a piped supply, <i>i.e.</i> , from wells or streams	...	...	...	94

### Swimming Baths

The general condition and the bacteriological state of the water at the Baths has been maintained at a high standard.

During the height of the bathing season from May to September, 12 samples of water from first and second class swimming pools were taken for bacteriological examination.

Of these samples 11 were classed as " Highly Satisfactory " with a complete absence of bacteria and one was classed as " Satisfactory " with only one organism which was a non-faecal *B. Coli*.

The filtration and chlorination processes, under adequate supervision, are providing a satisfactory water about which no complaints from bathers have been received.

### Drainage, Closet Accommodation, Sewerage and Public Cleansing

The Borough Surveyor (Mr. F. R. Dinnis) has kindly supplied the following information :—

" Existing houses connected to sewers during					
1948	...	...	...	...	Nil
Houses erected without connection to sewers					
during 1948	...	...	...	...	1

**Main Drainage.**—A new surface water drain was laid for the Oakfield Housing Estate and 4 sewers were laid for the Oakfield and Crowmoor Estates.

There have not been any major extensions or alterations to the main drainage system of the town, but plans for Stage 1 of the proposed new main drainage scheme were in the final stages of preparation at the end of the year for submission to a Local Enquiry, to be held by the Ministry of Health in 1949."

The present position as regards sewage disposal in the town as estimated during 1948 is as follows :—

Total number of houses in the Borough	...	12,021	
Number of houses connected to Corporation sewers	... ..	11,564	} 11,825
Number of houses connected to independent sewage disposal works, <i>e.g.</i> , cesspits, septic tanks	... ..	261	
Number of houses relying on earth closets, pail or chemical closets	...	196	
			(157 in added area)

### SANITARY INSPECTION OF THE AREA

Mr. C. Stanley (Chief Sanitary Inspector) submits the following remarks, and tabular statements of work carried out during the year :—

“ The year 1948 was one of slow but sure progress. The supply of building and other materials showed a slight improvement and, generally, repair and reconstruction work was expedited. However, there was no doubt that still further improvement is required if the results of compulsory inaction during the war years are to be rectified.

Structural repairs to dwelling-houses are most important, but concern is felt for the increase of overcrowding conditions in many properties. Defective floorboards, wall plaster, etc., are considered to be prejudicial to public health ; but, in many cases, we are compelled to overlook cases of overcrowding—probably more serious from a public health viewpoint. The feeling of frustration in this respect is common to officials and the unfortunate inhabitants of such premises.

“ Squatters,” in several parts of the Borough, presented another problem, as the Department was responsible for endeavouring to provide the essential factors necessary for public health—water supply and sanitation.

Some twenty-six houses scheduled for demolition, or subject to undertakings, pre-war, remain occupied under Defence Regulation provisions. Two houses, subject to Demolition Orders, made before September, 1939, were demolished. Other premises were closed or

demolished by owners, on account of dangerous and unfit conditions ; and a wholesale clearance of property in the Bridge Street—St. Austin's Street was commenced ('Bus Station site).

The progress in connection with food handling and preparation shows a comparatively brighter facet. At the beginning of the year Dr. R. H. Urwick, Chairman of the Public Health Committee, presided over a well-attended gathering of about 100 persons interested in the food trade, convened by the Health Department. An address, on Food and Drink Infections, was given by Dr. A. C. Jones, Director of the Public Health Laboratory, Shrewsbury. The interest which appeared to be aroused was sustained throughout the year, and many were the questions asked of Sanitary Inspectors, at the Health Centre and during the course of their visits to premises. Much voluntary work was carried out by the proprietors in the way of structural improvement and the introduction of more up-to-date machinery.

The particular attention paid to the manufacture of ice-cream appeared to be rewarded in the sampling results. One application for manufacture, refused in the previous year, was approved ; as the applicant had carried out works necessary to comply with the requirements of the Food and Drugs Act, 1938.

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There was an unusual number of complaints regarding the souring of Pasteurized and Tuberculin Tested milk retailed by one particular firm. The state of affairs can be gauged by the fact that of the twenty-one samples taken at this period, fifteen were unsatisfactory. This milk was received and bottled at a dairy outside the Borough. Representations to the Local Authority concerned, and the County Council, resulted in a subsequent improvement being effected.

There are, still, a few cowkeepers who carry on in ways for which the only sanction is "tradition" ; and one cannot make any reasonable excuse for milk produced within twenty miles of Shrewsbury being soured when delivered to consumers in the town.

In pre-war days a consumer would not tolerate sour milk from a retailer, as satisfactory supplies would be obtained elsewhere. Nowadays such a complaint will not allow the consumer to register with another retailer—except at specified times ; and rectification

is a matter for the Public Health Department. This position makes our task more difficult, but is, nevertheless, a difficulty to be surmounted.

We are cognizant of farmers' and retailers' difficulties, and know the reaction of the human element when supervision is relaxed or restricted ; but there is, certainly, much which can be done to improve milk supplies throughout the country.

An increased vigilance on the question of smoke emission had its compensation. Improvement in stoking methods was evident, and one firm arranged for the addition of certain plant calculated to abate a serious nuisance. Again, the regional Fuel Engineer's assistance was asked for and readily given.

Due regard and appropriate attention was given to all other statutory duties.

The Borough Surveyor's Staff receive the usual thanks for their invaluable assistance in many matters in which "dove-tailing" of duties are essential. The co-operation received from other Departments, in various instances, was greatly appreciated.

The Inspectorial Staff—Messrs. Griffiths, Livesey and Mabbott—did all that was asked of them in a tactful and efficient manner.

The extent of the Sanitary Inspectors' work can be summarized from the following statistics and explanatory notes."

### Complaints Received during the Year

There were 914 complaints received, and these were investigated in accordance with the following analysis :—

TABLE I

Nature of Complaint	Number Received
Housing Defects ... ..	197
Choked and Defective Drains and Sewers... ..	178
Accumulations of Offensive Matter ... ..	14
Relative to Unsound Food ... ..	110
Verminous Premises :—	
(a) Bugs ... ..	31
(b) Rats and Mice Infestations ... ..	113
(c) Beetles, Crickets, and Other Insects ... ..	30
Keeping of Animals and Poultry ... ..	13
Unsatisfactory Milk Supplies ... ..	15
Miscellaneous ... ..	213
Total ... ..	914

## Premises Inspected.

The following summary indicates the number of inspections of various premises carried out during the year :—

Nature of Inspection	Number of Visits
Dwelling-houses under Public Health Acts ... ..	4,393
Dwelling-houses under Housing Acts ... ..	412
Infected Dwelling-houses :—	
(a) Notifiable Diseases (other than Tuberculosis) ...	71
(b) Contacts ... ..	22
(c) Fumigations after infectious diseases ... ..	13
(d) Phthisis enquiries and fumigations ... ..	12
Elementary Schools and Church Halls ... ..	5
Business Premises ... ..	51
Cinemas, Dance Halls, Billiard Halls ... ..	12
Fairgrounds ... ..	7
Factory Act, 1937 :—	
Factories, with mechanical power ... ..	285
Factories, without mechanical power ... ..	26
Outworkers' premises ... ..	1
Smoke observations ... ..	93
Premises which can be controlled by Bye-laws :—	
Offensive Trade Premises ... ..	10
Stables, Piggeries, Keeping of Animals ... ..	117
Common Lodging-houses ... ..	1
Houses let in Lodgings ... ..	27
Tents, Vans and Sheds ... ..	110
Drainage : Testing by	
Smoke ... ..	40
Water ... ..	7
Coloured Water ... ..	251
Breaking down ... ..	3
re Public Sewers... ..	340
Drainage Work in Progress ... ..	105
Means of Escape in case of Fire (S. 60, Public Health Act, 1936)	3
Watercourses and Ditches ... ..	43
Land and Tips ... ..	83
Septic Tanks, Cesspools, Urinals... ..	199
Miscellaneous Visits ... ..	494
Visits, not Inspections ... ..	479

Nature of Inspection	Number of Visits
Verminous Premises :—	
(a) Rats and Mice (Infestation Order, 1943) ... ..	380
(b) Bug Infestations ... ..	182
(c) Beetles ... ..	12 <sup>a</sup>
(d) Other Vermin ... ..	24
Inspections <i>re</i> Supervision of Food :—	
Unfit Foodstuffs other than Meat ... ..	171
Slaughterhouses ... ..	22
Markets ... ..	12
Public Health (Meat) Regulation, 1924, Butchers' Shops...	205
Food and Drugs Act, 1938 (Section 13) :—	
Bakehouses ... ..	158
Factory Canteens ... ..	18
Restaurant Kitchens, etc. ... ..	208
Hotel and Beerhouse Bars and Cellars :—	
Day Inspections... ..	90
Night Inspections ... ..	—
Other Premises ... ..	205
Section 14 :—	
Sausage Manufacturers ... ..	162
Preserved Meat Preparation Premises ... ..	74
Preserved Fish Preparation Premises ... ..	80
Ice Cream Premises ... ..	214
Milk and Dairies Regulations, 1926 to 1943 :—	
Milk Sampling for Bacteriological Examination and Biological Test for Tuberculosis ... ..	171
Contraventions of Milk and Dairies Regulations ... ..	4
Cowsheds ... ..	157
Dairies at Farms ... ..	155
Milkshops and other Dairies ... ..	87
Shops Act, 1912-1936.	
Young Persons (Employment) Act, 1938 ... ..	134
Total Visits by Sanitary Inspectors ... ..	11,186

## Notices Served

Administrative action was taken during the year to secure abatement of nuisances and to enforce the appropriate statutory enactments as follows :—

Subject of Notice	Public Health Acts	Milk and Dairies Regs.	Food and Drugs Act S. 13 and 14	Factories Act, 1937	Shops Acts
Number of Informal Notices served ... ..	211	—	14	1	—
Number of Informal Notices complied with ... ..	208	2	10	1	—
Number of Informal Notices Outstanding (against Premises) ... ..	69	—	16	2	—
Number of Statutory Notices served ... ..	206	—	—	—	—
Number of Statutory Notices complied with ... ..	197	—	—	—	—
Number of Statutory Notices Outstanding (against Premises) ... ..	21	—	—	—	—
Number of Prosecutions ...	2	—	—	—	—

## Sanitary Improvements Effected at Dwelling-houses as a Result of Statutory and Informal Notices Issued

(Number of Premises, 414)

	Number Complied with
Defective Drains ... ..	21
Choked Drains ... ..	14
Insufficient Closet Accommodation ... ..	1
Absence of proper sink ... ..	3
Defective water closets ... ..	25
Defective gullies ... ..	3
Defective sink waste pipes ... ..	5
Defective W.C. cisterns and fittings ... ..	26
Burst water pipes ... ..	10
Insufficient water supply ... ..	5
Defective soil pipes ... ..	4
Dampness arising from :—	
Defective roofs ... ..	53
Defective eaves-gutters ... ..	18
Defective down-spouts... ..	12
Defective brickwork and pointing ... ..	18
Defective damp-proof courses ... ..	6
Defective yard paving ... ..	1
Defective chimney flues ... ..	5
Galvanized metal dustbins provided ... ..	177
Defective window-frames and sash-eords ... ..	51
Defective floors ... ..	37
Defective stairs ... ..	4
Defective plaster to walls and ceilings ... ..	126
Defective Doors ... ..	25
Defective fireplaces ... ..	19
Defective wash-boilers ... ..	11
Defective and dangerous chimney stacks ... ..	2
Defective and bulging external walls ... ..	9
Defective and bulging party walls ... ..	5
Filthy condition of premises ... ..	3
Accumulation of manure or offensive matter ... ..	—
Miscellaneous ... ..	22

### Additional Unsatisfactory Conditions remedied by Verbal Intimations

Nature of Inspection	No. of Premises	Structural Defects	Dirty Conditions
Dwelling-houses (Public Health Acts)	45	27	19
Factories ... ..	7	3	4
Restaurant Kitchens ... ..	2	1	1
Food Preparation Premises ... ..	8	4	6
Butchers' Shops ... ..	4	2	4
Ice Cream Premises (Sale/Manufacture)	2	1	1
Bakehouses ... ..	5	—	5
Hotel Bars ... ..	1	1	—
Hotel Cellars ... ..	1	1	—
Cowsheds ... ..	3	—	3
Dairies at Farms ... ..	3	—	3
Shops (Shops' Acts) ... ..	1	—	1
Keeping of Poultry and Animals ... ..	2	—	2
Accumulations of Refuse ... ..	17	—	17
Smoke Nuisances ... ..	2	—	—
Houses Let in Lodgings ... ..	2	—	2

## HOUSING

## Building Progress during 1948

By Local Authority :	†Temporary Houses	...	50	} 276	} 300
	‡‡Non-Traditional Houses	...	150		
	Traditional Houses	...	76		
By Private Enterprise	...	...	24		

†Erected for occupation by employees of Sentinel (Shrewsbury) Ltd.

‡‡The name given to steel houses.

So far, 1948 holds the record for post-war building, and gratifying though it may be, that nearly three times as many houses were built in 1948 compared with 1947, yet the need and the demand for many more hundreds of houses persist.

The need and the demand is, of course, made up by those living in overcrowded conditions, those living in unfit houses and those who, though not overcrowded nor living in an unfit house, naturally and properly desire to occupy a house solely as tenants or owners.

Before the outbreak of war in 1939, good progress was being made with slum clearance, or as it should more rightly be called to-day, clearance of unfit houses. If a slum is defined as a "squalid hovel" there may be a small proportion of houses left in Shrewsbury which fit that definition, but to avoid emotional exaggeration it would be more correct to state that the number of unfit houses in the town is considerable.

There are those houses which even ten years ago were earmarked for demolition order procedure to the number of about 800, and there are still more houses now which, though not classed as unfit in 1938, would be considered unfit in 1948, owing to deterioration with age and lack of attention during this ten-year period, caused by restrictions or lack of labour and materials, combined with a rising standard of fitness which the modern age is demanding not only as regards houses, but farmsteads, factories and offices where people work or live.

The more Council houses that are built the greater is the contrast between them and those built in previous decades, so that the latter in comparison are considered shabby and lacking in those reasonable amenities which are to-day considered as necessities rather than luxuries.

It might, therefore, be appropriate to inform the Council of the standard of fitness for habitation recommended by the Central Housing Advisory Committee of the Ministry of Health, which is as follows :—

A satisfactory house should :—

- (1) Be in all respects dry.
- (2) Be in a good state of repair.
- (3) Have each room properly lighted and ventilated.
- (4) Have an adequate supply of wholesome water laid on for all purposes inside the dwelling.
- (5) Be provided with efficient and adequate means of supplying hot water for domestic purposes.
- (6) Have an internal or otherwise accessible water closet.
- (7) Have a fixed bath, preferably in a separate room.
- (8) Be provided with a sink or sinks and with suitable arrangements for the disposal of waste water.
- (9) Be provided with facilities for domestic washing, including a copper, preferably in a separate room.
- (10) Have a proper drainage system.
- (11) Be provided with adequate points for artificial lighting in each room.
- (12) Be provided with adequate facilities for heating each habitable room.
- (13) Have satisfactory facilities for preparing and cooking food.
- (14) Have a well-ventilated larder or food store.
- (15) Have proper provision for storage of fuel.
- (16) Have a satisfactory surface path to outbuildings and convenient access from a street to the back door.

The Committee also recommended that a revised and more definite minimum standard of fitness should be established, and any house falling below would be regarded as unfit for human habitation.

One cannot say that any of the items listed above are superfluous or extravagant.

More and more attention is being paid to Health Education nowadays, and this form of activity is, in my view, most likely to bear fruit in the future when aimed at school children of an impressionable age, rather than at adults who are mostly habit fixed.

It is somewhat incongruous to spend large sums of money in the erection of "palatial" schools in which education in health

matters may be given, if the precepts absorbed during school hours cannot be put into practice on return to a home in which light and fresh air are curtailed and personal cleanliness cannot be easily or adequately carried out because of lack of water or a bathroom.

If, therefore, the above standard of fitness were to be applied to Shrewsbury forthwith, there would be many more hundreds of houses, other than the 800 already mentioned, which would have to be classed as unfit.

In illustration one might cite such suburbs as Cherry Orchard or Greenfields where, though the houses are comparatively modern, few were provided with bathrooms for instance, though some of them have had them installed at the sacrifice perhaps of a small bedroom.

If it came about that at some future date such houses were classified as unfit houses, it would not necessarily mean their out and out condemnation nor their demolition. It might be practicable to build on a bathroom combined with a scullery on the ground floor. If a bedroom was sacrificed for a bathroom so that such houses became two instead of three bedroomed houses, there will always be elderly persons whose families have grown up and departed, or young married couples with one or two small children or none, for whom such houses would be admirable.

If the hypothetical instance of the more modern suburbs of Cherry Orchard and Greenfields being classified subsequently as not coming up to the standard of fitness required, it is not difficult to imagine the position of many other houses in the town, which are not as superior as those already quoted.

Some day it may be that there will be a direction from the central Authority or a demand by public opinion that such matters as bathrooms should be provided in every house.

When this day comes, if not before, those in charge of municipal affairs will have to make extra provision as regards water supply and sewage disposal, not only for all new houses that are erected as the town develops, but also for the improvement and modernization of hundreds of existing houses.

### **Corporation Housing Estates**

The Housing Manager (Mr. E. Woodhead) has provided the following report on the activities of the Housing Department :—

### **“ Applications**

During the year 1948, 650 applications were received, bringing the total to 1,750. This was resulting from the review of all applications. At the end of the year the Ministry of Health called for a survey of applications by all local Authorities. This meant a survey of applications of twelve months' standing and under, with the result that a very high percentage was returned.

### **Allocations**

There were 150 B.I.S.F. type and 76 Traditional brick houses completed during the year. These were allocated as partly direct lettings and partly used for exchanges.

There were 22 exchanges with private owners, and 89 internal.

This principle of exchanging or “ screening ” on a long-term policy will prove highly effective from all points.

The basis of agreement to exchange has been\* for any or all of the following reasons :—

- (a) Transfer from lower rented type to higher rented type.
- (b) Mixed sex.
- (c) Overcrowding.

By moving tenants from the lower to the higher rentals, the houses are mostly being occupied by those who can afford to pay the rents and the lower rented houses are available to those people who cannot afford high rents.

By transferring those with mixed sex families, largely two bedroomed type houses are being released and are becoming available to urgent cases in lodgings. Two bedroomed type houses have not been built during 1948, therefore this policy of exchange has given applicants for this type of house equal opportunity with the larger families.

This very important point, which could be a very serious problem of separation of sexes in the future, is being removed *now* with the immediate benefit to present applicants at the same time.

### **Inspections**

It is proposed that a Housing Inspector shall be appointed so that the maintenance of the property can be more closely watched.”

## Municipal Hostel for Men

Mr. E. A. Andrews (Superintendent) gives the following figures and remarks on the above for the year 1948 :—

“ Beds available	...	...	...	38
Weekly lodgers	...	...	...	2,033
Nightly lodgers	...	...	...	252

The full complement of 38 beds available was maintained throughout the year. Twelve of the resident lodgers are old age pensioners.”

This undertaking, which is registered as a Common Lodging House, has been efficiently conducted as usual by Mr. Andrews throughout the year, and he has maintained the high standard of cleanliness. Some improvements have been effected, including drying arrangements for wet clothing.

## Housing Statistics

### 1.—Inspection of Dwelling-Houses during the Year

(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	...	...	...	...	1,598
(b) Number of inspections made for the purpose	...	...	...	...	5,351
(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	...	...	...	...	2
(b) Number of inspections made for the purpose	...	...	...	...	2
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	...	...	...	10
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	...	...	...	...	264

### 2.—Remedy of Defects During the Year Without Service of Formal Notices

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	...	...	...	...	205
---	-----	-----	-----	-----	-----

### 3.—Action under Statutory Powers During the Year

#### A.—Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936 :—

- |   |     |     |     |
|---|-----|-----|-----|
| (1) Number of dwelling-houses in respect of which notices were served requiring repairs   | ... | ... | Nil |
| (2) Number of dwelling-houses which were rendered fit after services of formal notices :— |     |     |     |
| (a) By owners   | ... | ... | Nil |
| (b) By Local Authority in default of owners   | ... |     | Nil |

#### B.—Proceedings under Public Health Acts :—

- |  |     |     |     |     |     |
|--|-----|-----|-----|-----|-----|
| (1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied | ... | ... | ... | ... | 205 |
| (2) Number of dwelling-houses in which defects were remedied after service of formal notices :—        |     |     |     |     |     |
| (a) By owners  | ... | ... | ... | ... | 203 |
| (b) By Local Authority in default of owners  | ... |     |     |     | 6   |

#### C.—Proceedings under Sections 11 and 13 of the Housing Act, 1936 :—

- |   |     |     |     |     |
|---|-----|-----|-----|-----|
| (1) Number of dwelling-houses in respect of which Demolition Orders were made   | ... | ... | ... | Nil |
| (2) Number of houses in respect of which an undertaking was accepted under Sub-Section (3) of Section 11 of the Housing Act, 1936 | ... | ... |     | 3   |
| (3) Number of dwelling-houses demolished in pursuance of Demolition Orders  | ... | ... | ... | 2   |

#### D.—Proceedings under Section 12 of the Housing Act, 1936 :—

- |   |     |     |     |     |     |
|---|-----|-----|-----|-----|-----|
| (1) Number of separate tenements or underground rooms in respect of which Closing Orders were made  | ... | ... | ... | ... | Nil |
| (2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit | ... | ... | ... | ... | Nil |

**4.—Housing Act, 1936, Part IV.—Overcrowding**

(a)	(i)	Number of dwellings overcrowded at the end of the year	...	...	...	Not known
	(ii)	Number of families dwelling therein	...			—
	(iii)	Number of persons dwelling therein	...			—
(b)		Number of new cases of overcrowding reported during the year	...	...	...	62
(c)	(i)	Number of cases of overcrowding relieved during the year	...	...	...	331
	(ii)	Number of persons concerned in such cases	...	...	...	1,008
(d)		Particulars of any cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding	...			Nil

**INSPECTION AND SUPERVISION OF FOOD****Milk Supply**

At the close of the year there were registered under the Milk and Dairies (Amendment) Act, 1922, and the Milk and Dairies Order, 1926 :—

Cowkeepers	...	...	...	...	54
Dairies	...	...	...	...	62
Retail purveyors of Milk	...	...	...	...	47

One hundred and fifty-eight samples of milk were taken during the year.

**Examination for Tubercle Bacilli**

Cultural and animal tests were made on 70 samples.

One sample proved positive, but the Veterinary Officer was unable to trace the animal implicated. A further sample, from the same herd, was negative.

**Phosphatase Test**

Three samples out of 46 failed on test. Conditions were rectified at the heat-treatment plant concerned.

### Methylene Blue Test

One hundred and seven samples were subjected to methylene blue test.

Twenty-two samples were unsatisfactory—all from retailers within the Borough. The majority can be attributed to the unsatisfactory supplies received from a dairy outside the Borough, and the complaints of "sour milk" referred to at the commencement of this report.

### Summary

Samples Taken	Test for Tubercle Bacilli		Methylene Blue		Phosphatase		Coliform	
	Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory
158	69	1	85	22	43	3	30	32

### Ice Cream

Premises registered for sale and manufacture	...	...	...	12
Premises registered for sale only	...	...	...	16

Eighty-two samples of ice-cream were taken during the year and subjected to examination for faecal coli and the methylene blue test. The results are indicated below :—

No. of Samples	Grade I	Grade II	Grade III	Grade IV	No Result	Faecal Coli
82	27	22	9	20	4	17

An unsatisfactory sample is followed up by further sampling, and advice, until the product is satisfactory. This, to a certain extent, accounts for the number of samples in categories III and IV.

One sample of ice-cream powder was examined and found bacteriologically satisfactory.

# PRECAUTIONS AGAINST CONTAMINATION OF FOOD

## Food and Drugs Act, 1938, Section 13

The following is a summary of conditions remedied during the year.

Condition	Food Preparation Premises, Restaurants, etc.	Hotels and Public Houses	
	No. of Defects Remedied	No. of Defects Remedied	
		Bars	Cellars
Dirty Floors ... ..	10	—	1
Dirty Walls ... ..	17	5	2
Dirty Ceilings ... ..	16	5	2
Dirty Doors and Windows ...	10	—	—
Insufficient or absence of hot water for cleansing utensils ...	6	1	—
Insufficient or absence of cold water for cleansing utensils ...	5	—	—
Absence of sink or adequate waste-pipe ... ..	7	1	—
Defective Draining-boards ...	4	—	—
Inadequate Lighting ... ..	4	—	—
Insufficient Ventilation ... ..	6	—	—
Unsatisfactory Personal Cleanli- ness ... ..	—	—	—
Unsatisfactory or absence of Staff-room ... ..	6	—	—
Insufficient or Unsuitable W.C.	8	2	—
Defective or Choked Drains ...	2	—	1
Absence of hot water for ablution purposes and inadequate staff room ... ..	11	—	—
Absence of or Unsatisfactory Wash-basins ... ..	5	—	—
Absence of Soap and Towels for Personal Ablution Purposes ...	4	—	—
Unsatisfactory Storage of Trade Refuse ... ..	7	—	—
Accumulation of refuse ... ..	2	—	—
Verminous conditions (steam flies, rats, mice) ... ..	2	—	—
Dirty fittings ... ..	4	—	—
Unsatisfactory storage facilities	6	—	—
Defective wall plaster ... ..	4	2	—
Defective floors ... ..	6	4	1
Defective ceiling plaster ... ..	6	3	1
Defective doors and windows ...	3	1	—
Defective Furniture ... ..	3	—	—
Dampness ... ..	—	—	1

**Food and Drugs (Adulteration) Act, 1928 ; Food and Drugs Act, 1938 ; and Public Health (Preservatives, etc., in Food) Regulations, 1925 to 1939**

The following fifty samples of Food and Drugs were taken, and all but two were reported as genuine and free from foreign ingredients.

Numbers indicate number of samples. F.=Formal, and Inf.=Informal.

Aspirin (1 Inf.) ; Baking Powder (2 F., 1 Inf.) ; Bicarbonate of Soda (1 Inf.) ; Borax (1 Inf.) ; Brawn (1 F.) ; Butter (6 F.) ; Castor Oil (1 Inf.) ; Cheese (4 F.) ; Cocoa (1 F.) ; Coffee (5 F.) ; Epsom Salts (1 Inf.) ; Plain Flour (1 F.) ; Self-Raising flour (2 F.) ; Glauber's Salt (1 Inf.) ; Tincture of Iodine (1 Inf.) ; Mustard (1 F.) ; Medicinal Liquid Paraffin (1 Inf.) ; Pepper (1 Inf.) ; White Pepper (1 F.) ; Seed Sago (1 F.) ; Sausages (4 Inf.) ; Sausage Meat (2 F.) ; Semolina (3 F.) ; Seidlitz Powders (1 Inf.) ; Vinegar (1 F.) ; Malt Vinegar (3 F.) ; Sulphate of Zinc (1 Inf.).

**“ Result of “ Not Genuine ” Samples**

- (1) Butter (Formal). 1.2% of water in excess of the standard of 16%. Cautioned by letter on instructions of Health Committee. Later re-sampled and found genuine.
- (2) Sausages (Informal). 16.5% deficient in meat content. Reported to Enforcement Branch, Ministry of Food.

### Chemical Analysis

The Sampling Officer took fifty-seven samples of milk during the year, the results being set out in the following table :—

#### Food and Drugs Acts—Analyses of Milk Samples

Number of Samples		Result of Analyses	Remarks on samples returned as " Not genuine "
Formal	Informal		
57	—	Formal { 52 Genuine 5 Not genuine	<ol style="list-style-type: none"> <li>1. Fat 2.3%. Solids not fat 8.8%. 23% deficient of fat. Vendor also producer of milk. " Appeal to cow " samples showed cows to be giving milk below standard for fat. Re-sampled later and found genuine.</li> <li>2. Fat 2.45%. Solids not fat 8.4%. 18% deficient of fat. Below for solids not fat. No added water, freezing point normal. Vendor also producer of milk. " Appeal to cow " samples showed cows to be giving milk below standard for fat. Re-sampled later and found genuine.</li> <li>3. Fat 2.3%. Solids not fat 8.9%. 23% deficient of fat. Vendor also producer of milk. " Appeal to cow " samples showed cows to be giving milk below standard for fat.</li> <li>4. Fat 2.85%. Solids not fat 8.5%. 5% deficient of fat. Re-sampled later and found genuine.</li> <li>5. Fat 4.1%. Solids not fat 8.1%. Contains 5% of added water, the addition of water being confirmed by the freezing point. Vendor fined £10 including costs.</li> </ol>

### Public Abattoir

The accompanying table sets out the comprehensive amount of work carried out so ably by the Superintendent (Mr. S. R. Reed) and his assistant :—

#### Public Abattoir CARCASSES INSPECTED AND CONDEMNED

	Cattle exclud- ing Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed ... ..	4554	1613	5780	21166	2582
Number inspected ... ..	4554	1613	5780	21166	2582
Dressed carcasses inspected ...	82	683	67	116	168
Total inspected ... ..	4636	2296	5847	21282	2750
<b>All Diseases except Tuberculosis :</b>					
Whole carcasses condemned ...	4	59	67	137	43
Carcasses of which some part or organ was condemned ...	1336	862	45	1389	215
Percentage of the number in- spected affected with disease other than tuberculosis ...	28.90	40.12	1.91	7.17	9.38
<b>Tuberculosis only :</b>					
Whole carcasses condemned ...	7	147	12	—	5
Carcasses of which some part or organ was condemned ...	1119	1106	—	—	295
Percentage of the number in- spected affected with tuber- culosis ... ..	24.29	54.57	0.20	—	10.90

Diseased and unsound conditions found in the animals dealt with caused the detention and surrender for destruction of a total weight in carcasses and offal of 108 tons 18 cwts. 59 lbs., details of which are given in the following table :—

	Carcasses	Offal
Beef ... ..	118,155 lbs.	105,755 lbs.
Veal ... ..	4,834 lbs.	
Mutton and Lamb ... ..	6,123 lbs.	
Pork ... ..	9,128 lbs.	

The following foodstuffs, other than meat, being unfit for human consumption were voluntarily surrendered for destruction :—

Fish	...	...	6,879 lbs.	C.C. Mutton	...	...	132 lbs.
Bacon and Ham	...	...	2 lbs.	Cheese	...	...	5 lbs.
Dried Fruit	...	...	99 lbs.	Sausage	...	...	12 lbs.
Tinned Goods	3,620	tins and jars		Shell Eggs	...	...	52
Canned Corned Beef	...	10½	lbs.	Other Foods	...	...	875¼ lbs.

## PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

The incidence of infectious diseases was, as in 1947, comparatively low.

Of the notifiable diseases Measles with 303 notified cases and Whooping Cough with 113 cases were the two most prevalent diseases.

In 1947 there were 21 cases of Scarlet Fever, whereas there were 47 in 1948, both of which figures are well below the average expected number of cases.

No cases of Diphtheria were notified.

A comprehensive investigation as to the source of the one case of Typhoid Fever was made. It was established that this case had been in close contact with what may have been a "missed case" in connection with the extensive outbreak of Typhoid Fever at the Orthopaedic Hospital.

Special specimens were sent to London for typing of the Typhoid bacillus which had been isolated, but it turned out to be of a different type to that of the Orthopaedic Hospital strain.

Diphtheria Immunisation work carried out during the year was as follows :—

The figures given include work carried out under the Council's immunisation scheme from January 1st to July, and subsequently by the County Council to whom the work was transferred after July 5th.

**Diphtheria Immunisation**

				Immunisations
Pre-School Children :	At Clinic	...	...	522
	By General Practitioners	...	...	73
School Children :	At Clinic	...	...	23
	By General Practitioners	...	...	2
Total				620

				Reinforcing Injection
At Clinic	...	...	...	88
By General Practitioners	...	...	...	3
Total				91

	Positive	Negative	Total
Post Schick Tests	13	376	389

During the year the ten thousandth Shrewsbury child was immunised since the beginning of Immunisation work.

No immunised Shrewsbury child has died of Diphtheria.

After July 5th Whooping Cough immunisation was carried out for those who applied for it to be done.

**Scabies**

The incidence of this disease has continued to decline from 139 Shrewsbury cases treated at the Dermal Clinic in 1947 to 58 treated in 1948.

	Pre-School Children	School Children	Adults	
Borough of Shrewsbury	8	20	30	79‡
Atcham Rural District	1	8	8	
Clun Rural District	—	1	3	

‡All of these were treated prior to July 5th with the exception of eight Shrewsbury adults, who were treated subsequent to July 5th.

# Monthly Incidence of Infectious Diseases Notified, 1948

(Not including Tuberculosis)

MONTH	Erysipelas	Ophthalmia Neonatorum	Acute Primary Pneumonia	Puerperal Pyrexia	Scarlet Fever	Measles	Whooping Cough	Acute Poliomyelitis	Enteric Fever	Dysentery
January ...	—	—	1	1	3	2	2	—	—	—
February ...	1	—	1	—	2	2	—	—	—	1
March ...	—	—	1	—	—	3	—	—	—	—
April ...	2	2	—	—	3	2	6	—	—	4
May ...	—	1	—	—	6	5	3	—	—	—
June ...	1	1	1	—	10	5	25	—	—	—
July ...	3	—	2	—	4	17	18	—	—	—
August ...	2	—	—	—	2	5	18	—	—	—
September...	—	—	—	—	1	16	19	—	—	—
October ...	—	—	1	—	3	114	8	—	—	—
November ...	1	—	—	—	7	65	12	1	1	—
December ...	1	—	1	—	6	67	2	—	—	—
Totals ...	11	4	8	1	47	303	113	1	1	5

## NOTIFIABLE DISEASES (OTHER THAN TUBERCULOSIS) DURING THE YEAR, 1948

NOTIFIABLE DISEASE	NUMBER OF CASES NOTIFIED										Total Cases removed to Hospital
	At all Ages	At Ages—Years									
		Under 1	1 to 3	3 to 5	5 to 10	10 to 15	15 to 25	25 to 45	45 to 65	65 & up-wards	
Small-pox ... ..	...	...	...	...	...	...	...	...	...	...	...
Diphtheria ... ..	...	...	...	...	...	...	...	...	...	...	...
Erysipelas ... ..	11	...	...	...	...	1	1	2	4	3	2
Scarlet Fever ... ..	47	...	1	6	25	6	5	4	..	...	34
Typhus Fever ... ..	...	...	...	...	...	...	...	...	...	...	...
Enteric Fever ... ..	1	...	...	...	...	...	1	...	...	...	1
Puerperal Pyrexia ...	1	...	...	...	...	...	...	1	...	...	...
Ophthalmia Neonatorum	4	4	...	...	...	...	...	...	...	...	2
Poliomyelitis ... ..	1	...	...	...	...	1	...	...	...	...	...
Pneumonia, Acute Primary	8	...	1	1	1	...	1	1	2	1	...
Do. Acute Influenzal	...	...	...	...	...	...	...	...	...	...	...
Cerebro-Spinal Fever ...	...	...	...	...	...	...	...	...	...	...	...
Encephalitis Lethargica ...	...	...	...	...	...	...	...	...	...	...	...
Polio-Encephalitis ...	...	...	...	...	...	...	...	...	...	...	...
Malaria ... ..	...	...	...	...	...	...	...	...	...	...	...
Dysentery ... ..	5	1	1	...	1	...	...	2	...	...	5
Measles ... ..	303	10	80	77	122	10	3	1	...	...	...
Whooping Cough ... ..	113	16	26	34	37	...	...	...	...	...	10
Totals ...	494	31	109	118	186	18	11	11	6	4	54

## TUBERCULOSIS

The Salop County Council administer the Tuberculosis service, but close co-operation is maintained, chiefly in connection with disinfection of rooms occupied by infectious patients or in re-housing those whose housing conditions are unsatisfactory.

## Tuberculosis

AGE PERIODS			NEW CASES				DEATHS			
			Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
			M.	F.	M.	F.	M.	F.	M.	F.
0 to 1 ... ..	...	...	—	—	—	—	—	—	—	—
1—5 ... ..	...	...	—	—	—	—	—	—	—	—
5—15 ... ..	...	...	—	—	1	1	—	—	—	—
15—25 ... ..	...	...	5	4	1	2	1	—	—	—
25—35 ... ..	...	...	2	—	—	1	2	—	—	—
35—45 ... ..	...	...	3	2	—	—	—	—	—	—
45—55 ... ..	...	...	2	—	—	2	1	—	—	—
55—65 ... ..	...	...	4	—	—	—	2	—	—	—
65 and upwards ...	...	...	—	—	1	—	—	—	—	—
Totals ...	...	...	16	6	3	6	6	—	—	—

Of the 6 deaths from Tuberculosis, 1, or 17 per cent, was not notified before death.

The Phthisis (Respiratory or Pulmonary Tuberculosis) death rate for the year was 0.13 per 1,000 population, compared with 0.32 in the previous year.

### **Public Health (Prevention of Tuberculosis) Regulations, 1925**

It was not found necessary to take any action under the above Regulations.

### **Public Health Act, 1936, Section 172**

No cause for action.

### **DISINFECTION AND DISINFESTATION**

A summary of work carried out by the Sanitary Inspectors in connection with infectious disease, disinfection and disinfection work is as follows :—

Visits made in connection with infectious disease ... ..	118
Disinfection carried out after :—	
Tuberculosis ... ..	14
Other infectious disease ... ..	12
Dwelling-houses treated for Bug Infestation, etc. ... ..	74

Disinfection with D.D.T. solution was carried out at 74 dwelling houses. The type of vermin was as given herewith :—

Bugs ... ..	71 houses
Fleas and Body Lice ... ..	2 houses
Cockroaches ... ..	1 house

In the case of bug infestation, 16 related to tenants moving into Corporation houses from bug-infested premises. 19 other cases were in Corporation-owned houses.

Although D.D.T. is proving a valuable ally, general cleanliness of houses is still a necessary adjunct. Some most loathsome cases of bug-infestation have been found, and point to lack of cleanliness on the part of the occupier ; rather a sorry state of affairs when disinfection may be had for the asking.

Two filthy and infested houses were occupied by tenants who volunteered to enter hospital in their inability to tend to themselves.

The filthy state of a yard was dealt with under the provisions of Section 79 of the Public Health Act, 1936 ; the Corporation workmen executing the work in default of the occupier.

### **Disinfector**

The following articles were disinfected :—

Mattresses	Blankets	Pillows	Sheets
135	547	80	175

### **DESTRUCTION OF RATS AND MICE**

The County Council Rodent Operative, working under the supervision of the Chief Sanitary Inspector, dealt with business and other premises under contract. There were no major infestations to record.

Routine sewer treatment of the more populous areas of the town, together with test-baiting of outlying areas recorded a decrease in the rat population. As to whether this favourable state of affairs continues is, of course, a matter of conjecture, and bi-annual treatment is an essential operation.

Many minor infestations of rats and mice were satisfactorily dealt with by occupiers as a result of advice given by the Inspectorial Staff.

### **MONKMOOR ISOLATION HOSPITAL**

#### **An Account of the Work of the Hospital, 22nd November, 1923, to 5th July, 1948**

The above Hospital, under the jurisdiction of the Shrewsbury and Atcham Joint Hospital Board, had functioned for approximately a quarter of a century when it was taken over by the Regional Hospital Board, under the National Health Service Act, 1946, on July 5th, 1948.

Parliament confirmed the Shrewsbury and Atcham Joint Hospital Order on July 28th, 1921, from which date the Joint Hospital Board was constituted, and the first meeting of the Board was held at the Guildhall on September 27th, 1921.

In 1918, towards the end of the Great War, buildings were erected for use as a Women's Hostel for the W.A.A.C. on the site now occupied by the Hospital.

At that date the Borough of Shrewsbury possessed a small Isolation Hospital of 15 beds at Monkmoor Hall. The then Local Government Board were not satisfied with the existing provision and the two Councils of Shrewsbury and Atcham were in 1919 preparing plans for additions to Monkmoor Hall. The Local Government Board were prepared to approve temporary additions only on the understanding that within five years permanent isolation hospital accommodation, to the extent of 50 beds, should be provided by the Joint Authorities.

The vacant recently constructed buildings, which now constitute the Hospital, appeared to the then Chairman of the Public Health Committee (the late Alderman Adams) and the then Medical Officer of Health (Dr. Fenton) to be most suitable for conversion into an Isolation Hospital to replace the cramped and unsatisfactory accommodation at Monkmoor Hall.

It was decided to approach the Atcham Rural District Council as to the desirability of joining forces seeing that the Atcham Council had no Isolation Hospital facilities of their own.

When the decision to seek powers to form a Joint Hospital Board was come to, an approach was made to the Ministry of Health. The Ministry of Health, after scrutiny of plans of the layout, decided that sanction of the proposals could not be given owing to the fact that among other things, there was not the necessary 40 feet distance between ward blocks which was a customary requisite for the approval of plans for Isolation Hospitals.

Locally, it was felt that the opportunity of acquiring a site and buildings, *at a much cheaper rate than would be the case if an entirely new hospital on model plans had to be built*, was too good to be lost on a technical objection. It was decided, therefore, to ask Shrewsbury's M.P. to intervene, by putting down a question about the matter to be asked in the House of Commons.

This was done, and very shortly afterwards sanction to proceed was obtained from the Ministry of Health.

A loan to cover the cost of purchase of the site of 5.86 acres, the existing buildings and alterations to them, and the erection of a nurses' home, a lodge, a laundry, ambulance, mortuary and disinfectant block, and a building for the generation of electricity, was granted in the sum of £10,450.

The Ministry of Health would only sanction accommodation for 26 patients, as owing to slight deficiency in the height of the wards, the cubic air capacity was not up to regulation requirements, whereas the floor space giving 144 square feet per bed would have sufficed for a greater number of patients.

The Hospital, therefore, was set up and equipped at an approximate cost of £400 per bed, which was not high in those days after the Great War, when costs and prices were abnormal, as they are to-day after the second World War.

If a new Hospital had had to be built in those days the approximate cost per bed would have been £1,000.

As a result of practical experience and owing to the good system of cross ventilation of wards, the restriction to 26 beds has not been adhered to, and more beds have been made available without any detrimental results compared with other Isolation Hospitals.

The following additions or improvements have been made in the course of time :—

1. Re-roofing of the Hospital.
2. Town electric supply in substitution for electric generating plant.
3. Addition of two cubicles to a side ward.
4. Provision of an open air shelter (four beds) with sanitary annexe.
5. Provision of a cubicle block (six beds).
6. Provision of an operating theatre.
7. The laying of a gas supply to the Hospital.
8. The conversion of disused maids' quarters into a dwelling for the porter.

The total beds now available in the Hospital number 54.

At its inception the Joint Hospital Board invited outside Authorities to avail themselves of the facilities provided to send in their patients if the necessary accommodation was available, by entering into contract with the Board for payment of maintenance charges, which were to be at the rate of 9s. per day. The charge made to outside Authorities was at the rate of 15s. per day prior to July 5th, 1948.

The majority of outside Local Authorities in the County of Salop did sign such contracts, as well as the County of Montgomery which had no Isolation Hospital provision of its own.

Whereas at the outset there were small Isolation Hospitals at Ludlow, Bridgnorth, Newport, Market Drayton and Oswestry, all these except the last named have been closed in recent years, so that Monkmoor Isolation Hospital catered for practically the whole of the County of Salop, the whole of the County of Montgomery, and most of the County of Radnor.

The one main deficiency in the working of the Hospital was the lack of an ambulance of its own, use having had to be made of a County Council ambulance on hire.

The Hospital was opened for the admission of patients on November 22nd, 1923, and the following statistics are given in an attempt to show the work that has been carried out during the period of 24½ years (November, 1923—July 5th, 1948).

**Total Admissions**

The total admissions of cases from November, 1923, to July 5th, 1948, has been 6,542.

Year	Shrewsbury	Atcham	Outside Authorities including Military	Total
1923 (Nov. to Dec. 31st)	12	7	—	19
1924 ... ..	116	27	13	156
1925 ... ..	117	43	18	178
1926 ... ..	136	19	23	178
1927 ... ..	99	14	36	149
1928 ... ..	124	14	31	169
1929 ... ..	71	26	56	153
1930 ... ..	120	32	79	231
1931 ... ..	84	46	107	237
1932 ... ..	83	39	73	195
1933 ... ..	74	19	70	163
1934 ... ..	46	7	91	144
1935 ... ..	77	16	105	198
1936 ... ..	86	15	169	270
1937 ... ..	143	19	118	280
1938 ... ..	174	37	207	418
1939 ... ..	141	20	186	347
1940 ... ..	183	57	371	611
1941 ... ..	97	51	463	611
1942 ... ..	114	19	328	461
1943 ... ..	84	23	257	364
1944 ... ..	70	11	227	308
1945 ... ..	83	9	163	255
1946 ... ..	61	6	117	184
1947 ... ..	36	6	114	156
1948 (to 5th July)	41	19	47	107
	<hr/>	<hr/>	<hr/>	<hr/>
	2472	601	3469	6542
	<hr/>	<hr/>	<hr/>	<hr/>

Although the average of annual admissions works out at 266 per annum, this figure does not give a true picture of the normal annual work of the Hospital owing to the abnormal amount of work undertaken during the war years, which distorts matters.

The annual average admissions from the respective areas have been :—

Shrewsbury	...	...	...	...	100
Atcham	...	...	...	...	25
Outside Authorities and Military	...				141

### Nature of Work

The subjoined list of diseases for which patients were admitted, shows that the Hospital has catered for most of the infectious diseases. The actual figures given are not accurate in themselves seeing that on an average 14% of cases were rediagnosed owing to an incorrect diagnosis on admission.

Disease	Cases	Disease	Cases
Scarlet Fever ... ..	3472	Diphtheria ... ..	2055
Erysipelas ... ..	171	Measles ... ..	173
Enteric Fevers ... ..	104	German Measles ... ..	91
Dysentery ... ..	71	Whooping Cough... ..	86
Cerebro-spinal Meningitis	250	Mumps ... ..	31
Poliomyelitis ... ..	11	Chicken Pox ... ..	7
Encephalitis Lethargica	1	Vincent's Angina... ..	3
Puerperal Fever... ..	3	Pemphigus ... ..	6
Glandular Fever ... ..	1	Infective Jaundice ... ..	1
Anthrax ... ..	2	Malaria ... ..	1
Scabies ... ..	1	Observation Case ... ..	1

The following surgical operations under general anaesthesia have been performed at the Hospital :—

	Opera- tions		Opera- tions
Tracheotomy ... ..	46	Abscesses and Cellulitis ...	18
Tonsils and Adenoids ...	49	Removal of Appendix ...	2
Mastoid ... ..	33	Curettage of Uterus ...	2
Miscellaneous ... ..	3		

Two patients have given birth whilst in Hospital : one being a stillbirth, the other a live birth.

There have been 205 deaths among the 6542 patients. Of these deaths 116 were due to Diphtheria, 33 to Meningitis, 13 to Scarlet Fever, 8 to Enteric Fever, 8 to Erysipelas, 9 to Whooping Cough, 2 to Measles, and 16 to other miscellaneous causes.

## General Remarks

It would appear, from the functioning of the Hospital as set out in this Report, that the foresight, judgment and determination of those responsible for its institution have been justified.

Although the Hospital was provided for and maintained by the ratepayers of the Borough of Shrewsbury and the Atcham Rural District Council, the cost being a sort of premium for the insurance of accommodation for their respective patients, yet it has so happened that in the history of the Hospital more than half the total patients admitted, namely 53%, have been from Outside Authorities. These outside Authorities, most of whom had not provided Isolation Hospital accommodation themselves, were thus able to benefit by the provision made by the Joint Hospital Board at a relatively cheaper cost to their respective ratepayers, despite payment of maintenance charges, than if they had themselves provided their own accommodation.

At this juncture it is only fair to certain Local Authorities to mention that at the request of and by agreement with certain Authorities in the County of Radnor, namely Knighton U.D.C., Knighton R.D.C., and Presteigne U.D.C., a cubicle block of six beds, five of which were to be reserved for patients sent in from either of the three above Local Authorities, was erected and put into use in 1938.

The loan charges on the capital cost of five of the six cubicles are borne jointly by these three Authorities, and the sixth cubicle by the Joint Hospital Board. In addition the usual maintenance charges are paid by these Authorities for their patients. When all loan charge payments have been discharged by the three Authorities, the cubicle block was to become the property of the Joint Hospital Board.

The enterprise and initiative of these three Local Authorities has, it is hoped, benefited them in the carrying out of their responsibilities ; it has certainly benefited the Joint Hospital Board in that use of the cubicles could be made for patients other than those from these three areas, and during the heavy period of work in the war years and generally, the provision of this cubicle block has been of inestimable value.

In the Ministry of Health's Hospital Survey Report made in 1945, Monkmoor Isolation Hospital is described as "The only well found Infectious Diseases Hospital in the County," and that "the buildings are good and well equipped with a fair proportion of small wards" and that it "accepts the full range of acute infectious diseases."

At the beginning of the present year administrative officers of the Regional Hospital Board visited the Hospital and expressed surprise at the good condition and general appearance of everything they saw, and felt that in its future, full use ought to be made of the existing facilities.

It is thought that the great majority of patients have been happy and well treated during their period of irksome isolation, and all that can be stated definitely is that very many grateful letters of thanks, as well as donations for the nursing staff, have been received, whereas complaints have been rare and almost conspicuous by their absence.

### **MATERNITY AND CHILD WELFARE**

The subjoined tables and record of work performed only relate to the first half of the year before the Service was transferred to the County Council on July 5th.

## VISITS OF HEALTH VISITORS

	Ante-Natal Visits	Under 1 year		1-5 Years Visits	Infant Death Enquiries	Still-birth Enquiries	Child Life Protection Visits	Miscellaneous Visits	Total
		First Visits	Return Visits						
January ...	44	100	161	401	5	3	4	17	735
February ...	54	52	130	321	3	—	3	7	570
March ...	32	88	132	283	6	1	7	13	562
April ...	31	71	113	312	2	1	1	5	536
May ...	21	69	73	195	1	—	—	6	365
June ...	43	79	271	378	2	3	2	2	780
Total ...	225	459	880	1890	19	8	17	50	3548

## WELFARE CENTRES

		Under 1 year		1-5 years	
		Health Centre	White House	Health Centre	White House
New Cases	Borough	199	116	30	16
	County	16	3	8	2
		334		56	
Total Attendances of Old and New Cases		1925	1283	800	564
		3208		1364	

The amount of work done at each session may be gauged from the following average numbers :—

	Health Centre	White House
Average attendance of Mothers each afternoon ...	48	31
Average attendance of Children each afternoon ...	56	35
Average number of Children medically examined	17	9

(The above average numbers include mothers and children resident outside the Borough.)

Other activities may be summarized as follows :—

Number of Mothers who received Dental Treatment	...	27
Number of Children who received Dental Treatment	...	21
Number of Home Helps provided ... ..	...	37
Number of Children admitted to Orthopaedic Hospital	...	3
Number of pounds of Dried Milk supplied ... ..	...	250

### Ante-Natal Clinic

The following figures show the work that has been done :—

Number of Sessions held	...	...	...	...	...	31
Number of Patients examined :—						
Ante-Natally	...	...	...	...	‡303	} 308
Post-Natally...	...	...	...	...	5	
Total number of attendances	...	...	...	...	...	‡660

‡9 and 16 respectively of these numbers refer to women resident outside the Borough.

### Maternal Mortality and Morbidity

The following figures relate to Maternal Mortality and Morbidity statistics during the year :—

Cases of Puerperal Pyrexia notified	...	...	1
Cases of Puerperal Pyrexia removed to Hospital			Nil
Deaths from Puerperal Sepsis ... ..	...	...	Nil
Deaths from other Puerperal causes	...	...	1
Maternal Mortality Rate	...	...	1.2

The services of the Council's Obstetric Consultant were required on one occasion.

There were no consultations in respect of Puerperal Pyrexia.

**HOME HELPS SERVICE**

				Maternity	General	Total
Number of hours worked by						
Home Helps	...	...		4,753 $\frac{3}{4}$	8,229	12,982 $\frac{3}{4}$
Applications—						
New households booked	...			36	76	112
Applications cancelled	...			1	6	7
Applications renewed and						
attended	...	...	...	1	23	24
Householders' Assessments—						
Full Rate	...	...	...	13	57	70
Subsidised Rate	...	...		23	19	42
Cancelled cases—						
Full Rate	...	...	...	—	6	6
Subsidised Rate	...	...		1	—	1
Renewed cases—						
Full Rate	...	...	...	1	17	18
Subsidised Rate	...	...		—	6	6
Householders' Payments	...			£202 /3 /4	£461 /1 /2	£663 /4 /6









